

062304
PART B - FEE(S) TRANSMITTALComplete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

JUN 22 2004

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

00164 7590 05/21/2004

KINNEY & LANGE, P.A.
THE KINNEY & LANGE BUILDING
312 SOUTH THIRD STREET
MINNEAPOLIS, MN 55415-1002

SENT VIA EXPRESS MAIL

LABEL NO.: EV004176201US

| | |
|------------------------|--------------------|
| Gena M. Chapman | (Depositor's name) |
| <i>Gena M. Chapman</i> | (Signature) |
| 6-22-04 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/025,207 | 12/18/2001 | James W. Comb | S697.12-0059 | 4829 |

TITLE OF INVENTION: LIQUIFIER PUMP CONTROL IN AN EXTRUSION APPARATUS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES | \$665 | \$0 | \$665 | 08/23/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------------|----------|----------------|
| LECHERT JR, STEPHEN J | 1732 | 264-040700 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kinney & Lange, P.A.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Stratasys, Inc.

Eden Prairie, MN

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0982 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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06/25/2004 RHEBRAH1 00000051 10025207

01 FC:2501

665.00 DP

TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named

Inventor : James W. Comb

Appln. No. : 10/025,207

Filed : December 18, 2001

Title : LIQUIFIER PUMP CONTROL IN AN EXTRUSION
APPARATUS

Docket No. : S697.12-0059

Group Art Unit: 1732

Examiner: S. Lechert, Jr.

EXPRESS MAIL COVER SHEET

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SENT VIA EXPRESS MAIL

Express Mail No.: **EV004176201US**

Sir:

The following papers are being transmitted via **EXPRESS MAIL** to the U.S. Patent and Trademark Office on the date shown below:

1. Fee Calculation Form with attached check for \$665.00;
2. Part B - Fee(s) Transmittal;
3. "FEE ADDRESS" Indication Form.

Respectfully submitted,

KINNEY & LANGE, P.A.

Date: 6-22-04

By

Gena M. Chapman, Reg. No. 39,627

THE KINNEY & LANGE BUILDING

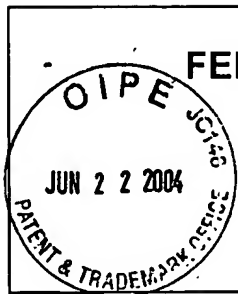
312 South Third Street

Minneapolis, MN 55415-1002

Telephone: (612) 339-1863

Fax: (612) 339-6580

GMC:kmm



FEE TRANSMITTAL

Total Amount of Payment \$ 665.00

Complete if Known

Application No. 10/025,207
Filing Date December 18, 2001
First Named Inventor James W. Comb
Group Art Unit 1732
Examiner Name Stephen J. Lechert, Jr.
Atty. Docket Number S697.12-0059

METHOD OF PAYMENT (Check One)

1. ☒ The Commissioner is hereby authorized to charge any additional fee required under 37 C.F.R. 1.16 and 1.17 and credit any over payments to Deposit Account No. 11-0982. Deposit Account Name: Kinney & Lange, P.A. A duplicate copy of this communication is enclosed

2. ☒ Check Enclosed

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------|
| 1001 | 770 | 2001 | 385 | [] Utility Filing Fee |
| 1002 | 340 | 2002 | 170 | [] Design Filing Fee |
| 1004 | 770 | 2004 | 385 | [] Reissue Filing Fee |
| 1005 | 160 | 2005 | 80 | [] Prov. Filing Fee |

Subtotal (1) \$-0-

2. EXTRA CLAIM FEES

| | Number Claims | Prior | Extra | Fee from Below | Fee Paid |
|---------------------------|------------------|-------|-------|-------------------|----------|
| Total | - | = | X | = | - |
| Indep. | - | = | X | = | - |
| Multiple Dependent Claims | - | = | - | = | - |

Insert 3 and 20, or number previously paid if greater; Reissue see below

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Description |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|---|
| 1202 | 18 | 2202 | 9 | Claims in excess of 20 |
| 1201 | 86 | 2201 | 43 | Independent claims in excess of 3 |
| 1203 | 290 | 2203 | 145 | Multiple Dependent Claim |
| 1204 | 86 | 2204 | 43 | Reissue Independent Claims Over Original Patent |
| 1205 | 18 | 2205 | 9 | Reissue claims in excess of 20 and over original patent |

Subtotal (2) \$-0-

FEE CALCULATION (Continued)

3. ADDITIONAL FEES

| Large Entity Fee Code | Large Entity Fee (\$) | Small Entity Fee Code | Small Entity Fee (\$) | Fee Description | Fee paid |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|----------|
| 1051 | 130 | 2051 | 65 | Surcharge - Late filing fee or oath | - |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | - |
| 1053 | 130 | 1053 | 130 | Non-English specification | - |
| 1812 | 2,520 | 1812 | 2,520 | For Filing a Request for Reexamination | - |
| 1251 | 110 | 2251 | 55 | Extension for reply within first month | - |
| 1252 | 420 | 2252 | 210 | Extension for reply within second month | - |
| 1253 | 950 | 2253 | 475 | Extension for reply within third month | - |
| 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | - |
| 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | - |
| 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | - |
| 1403 | 290 | 2403 | 145 | Request for oral hearing | - |
| 1814 | 110 | 2814 | 55 | Terminal Disclaimer Fee | - |
| 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | - |
| 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | - |
| 1501 | 1,330 | 2501 | 665 | Utility/Reissue issue fee | 665 |
| 1502 | 480 | 2502 | 240 | Design issue fee | - |
| 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | - |
| 1807 | 50 | 1807 | 50 | Petitions related to provisional applications | - |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Statement | - |
| 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | - |
| 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | - |

Other fee (specify) _____

Subtotal (3) \$665.00

Signature Gena M. Chapman

Reg. No. 39,627

Date 6-22-04

Deposit Account No. 11-0982